

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Center for Medicare and Medicaid Services****[Document Identifier: CMS-R-296]****Agency Information Collection Activities: Submission for OMB Review; Comment Request****AGENCY:** Center for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Center for Medicare and Medicaid Services (CMS) (formerly known as the Health Care Financing Administration (HCFA)), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: Revision of currently approved collection;

Title of Information Collection: Home Health Advance Beneficiary Notice of Liability and Supporting Regulations in 42 CFR 484.10(a);

Form No.: HCFA-R-296 (OMB# 0938-0781);

Use: Home health agencies must provide proper written notice to Medicare beneficiaries in advance of furnishing home health care that they believe that Medicare will not pay for before reducing, terminating, or denying services to a Medicare beneficiary;

Frequency: On occasion;

Affected Public: Not-for-profit institutions, business or other for-profit;

Number of Respondents: Federal Register 7,857;

Total Annual Responses: 145,966;

Total Annual Hours: 14,597.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS' Web Site address at <http://www.hcfa.gov/regs/prdact95.htm>, or E-mail your request, including your address, phone number,

OMB number, and CMS document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 30 days of this notice directly to the OMB desk officer: OMB Human Resources and Housing Branch, Attention: Allison Eydt, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: March 21, 2002.

John P. Burke III,

CMS Reports Clearance Officer, CMS Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards.

[FR Doc. 02-7984 Filed 4-2-02; 8:45 am]

BILLING CODE 4120-03-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Medicare and Medicaid Services****[Document Identifier: CMS-P-0015SPA]****Emergency Clearance: Public Information Collection Requirements Submitted to the Office of Management and Budget (OMB)****AGENCY:** Centers for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as the Health Care Financing Administration (HCFA)), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

We are, however, requesting an emergency review of the information collection referenced below. In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, we have submitted to the Office of Management

and Budget (OMB) the following requirements for emergency review. We are requesting an emergency review because the collection of this information is needed before the expiration of the normal time limits under OMB's regulations at 5 CFR part 1320. Due to the events of September 11, 2001, the timing of this proposed information collection has been negatively affected. We are requesting Emergency OMB review for this supplement since this is a beneficial survey and it can do no harm if OMB acted upon this sooner than the normal timeframe. The 60-day **Federal Register** notice was published on January 8, 2002, for which we solicited public comment. CMS is requesting OMB review and approval of this collection by April 25, 2002, with a 180-day approval period. Written comments and recommendations will be accepted from the public if received by the individuals designated below by April 22, 2002.

Type of Information Collection

Request: New collection; **Title of Information Collection:** Medicare Current Beneficiary Survey—Supplement on Patient Activation;

Form No.: CMS-P-0015SPA (OMB# 0938-NEW); **Use:** A primary theme of the NMEP education efforts has been to help Medicare beneficiaries make choices. Simply providing uniform information to an undifferentiated audience is not sufficient. CMS needs to know whether beneficiaries have the communication skills, motivation and basic knowledge of their own health status to be partners in their own health care. The purpose of this survey supplement is to assess the degree to which Medicare beneficiaries participate actively in their own health care decisions.; **Frequency:** One-time; **Affected Public:** Individuals or Households; **Number of Respondents:** 16,000; **Total Annual Responses:** 16,000; **Total Annual Hours:** 2,666.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS's Web Site address at <http://www.hcfa.gov/regs/prdact95.htm>, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326.

Interested persons are invited to send comments regarding the burden or any other aspect of these collections of information requirements. However, as noted above, comments on these information collection and recordkeeping requirements must be